

Please complete & mail by February 28! *(Returning this form is not a commitment to participate.)*

Organization Name _____
Organization Address _____
Contact Person _____ Phone _____

Please check the workshop you plan to attend (details in letter).

All day workshop to be held at the **Pierre School Admin Building** DDN Workshop, March 10th (mark date and time)
211 S Poplar Avenue, Pierre SD 57501

_____ 1:00 pm – 1:45 pm – Seamless participants	_____ March 26 th – new sponsors of open and enrolled
_____ 2:00 pm – 4:00 pm – other experienced sponsors	_____ SFSP sites
_____ Watertown, Lake Area Technical Institute	_____ *** Note: This workshop is not intended for
_____ Pierre, Capitol Studio B	_____ Seamless Summer Option Participants
_____ Rapid City, SDSM&T / CB 109	
_____ Mitchell, Mitchell Technical Institute / TC 155	
_____ Sioux Falls, Sioux Falls University Center / 282	

Name of the person(s) attending the workshop _____ Phone _____

_____ We will not be able to attend this year's program, but we would like information for next year's program.

Please indicate requests for alternative formats and/or interpreters: ☐ Disk ☐ Braille ☐ Large Print ☐ Interpreter
☐ Other Access Requests: _____